

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

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Harceem Hamilton

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Joseph Ponte

Deputy Warden Hayes

Deputy Warden Kelly

Chief Carty

Deputy Warden Dunbar

Deputy Warden Bressley

Kenneth Stokes, Assistant Chief.

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No
(check one)

15CV 9458

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Harceem Hamilton
ID # 4411501732
Current Institution Enhance Supervision Housing (ESH) aBCC
Address 1600 Hazen Street
East Elmhurst New York 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Joseph Ponte Shield # N/A
 Where Currently Employed New York Department of Corrections
 Address N/A

Defendant No. 2

Name Deputy warden Hayes Shield # N/A
 Where Currently Employed New York Department of Corrections
 Address N/A

Defendant No. 3

Name Deputy warden Kelly Shield # N/A
 Where Currently Employed New York Department of Corrections
 Address 1600 Hazen Street
East Elmhurst New York 11370

Defendant No. 4

Name Deputy warden Dunbar Shield # N/A
 Where Currently Employed New York Department of Corrections
 Address 1600 Hazen Street
East Elmhurst New York 11370

Defendant No. 5

Name Deputy warden Pressley Shield # N/A
 Where Currently Employed New York Department of Corrections
 Address 1600 Hazen Street
East Elmhurst New York 11370

Defendant No. 6

Cheff Canty Shield # N/A
New York Department of Corrections
1600 Hazen Street East Elmhurst NY 11370

II. Statement of Claim: 1600 Hazen Street East Elmhurst NY 11370

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what institution did the events giving rise to your claim(s) occur? Enhance, Supervision Housing. (ESH) o.b.c.c 1600 Hazen Street East Elmhurst NY 11370
- B. Where in the institution did the events giving rise to your claim(s) occur? (E.S.H.)
Enhance, Supervision Housing
- C. What date and approximate time did the events giving rise to your claim(s) occur? April 20, 2015 (4/20/15)

D. Facts: SEE Page Attached

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

SEE Page Attached #1

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. Said treatment of unjust, unfair, illegal, Solitary Confinement in Enhance Supervision Housing (ESH) Has caused me to become detached from others, reclusive, questioning my self worth and times thoughts of ending my life. one can only wonder the long lasting damaging affects that this "slave like treatment" will have on me depression, stress from limited contact with family children,

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Enhance Supervision Housing (ESH) O.B.C.C.
Otis Ramtum Correctional Facility 1600 Hazen Street East Elmhurst NY 113

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?
 Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?
 Yes ☐ No ☒ Do Not Know ☐

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?
 Yes ☒ No ☐

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☐

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

yes in O.B.C.C. Enhance Supervision Housing unit (ESH)
 1. Which claim(s) in this complaint did you grieve? being locked down 25 hours every other day some days more than 25 hours

2. What was the result, if any? was told not grievable matter

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. GRIEVANCE COORDINATOR INDICATED that the issue is "Not Grievable"

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: N/A

2. If you did not file a grievance but informed any officials of your claim, state who you

informed, when and how, and their response, if any: _____

N/A

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. Spoke to Deputy Wardens Kelly, deputy warden Hayes, Deputy warden Dunbar, Deputy warden pressley, along with Chiff' canty about being locked in cell for periods over twenty-five Hours (25) Hours without the benefits of a Shower nor being allowed to recreation with a (24) hour period, also spoke to another warden Jones, and was told by all named above that there was nothing they can do about it!!

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. **Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). Remove deponent from (ESH) (C.P.S.U) Enhance Supervision Harsing, make deponent whole for mental Injuries, Stress, depression, Caused by actions of Department of Corrections due to limited Contact with family and children. I ask in the amount of one million Dollars (1,000,000.00)

Attachment # "1"

I am currently detained at the Otis Bantam Correction Center, (O.B.C.C.) housed in the Enhance Supervision Housing, (E.S.H.), a Non-Punitive Segregation Housing. We the inmates housed in this area, are made to believe that this is a regular housing area, with enhance supervision. The detainees in the E.S.H. are not punitive segregation inmates, and are not serving any "BOX" time. We are being treated as inmates who are in Punitive Segregation. Every other day, we are locked in for a period over TWENTY-FIVE HOURS (25) hours, without the benefits of a shower, nor being allowed to recreation with a 24 hour period.

The Department of Correction of the City of New York has established with it Rules and Regulations, Directives, Inmate Rule Book, that inmates are to have a representative in the Inmate Council. The inmates housed in E.S.H., are being deprived of this established rule. While it is clear that inmates in Punitive Segregation are not entitled to Inmate Council, we in ESH are NOT Punitive Segregation inmates, and should not be treated as such. This practice should cease and desist immediately.

It has been established that the E.S.H. Program, is to run for a period of 45 days. Out of those 45 days, we are doing 22 days of "BOX" time, in violation of our civil rights, as we have not committed any acts, nor have been found guilty of any infarctions that warrants, our locked-in status, in excess of 24 hour.

The Department of Correction have deemed it appropriate to eradicate all rights that are held by those placed in their custody. From excessive and unjust beatings, denial of prompt medical attention, and prolonged delay in delivering inmates in ESH to the visit area.

Said treatment of unjust, unfair, illegal, solitary confinement in ESH, have caused me to become detach from others, recluse, questioning my self worth, and at times, thoughts of ending my life. One can only wonder the long lasting damaging affects that this "slave like treatment", will have on me.

The Department of Correction has not learned from their dubious pass. There is no air conditional in ESH, nor am I saying that there should be, but the Department keeps us in the cells, even when the temperature exceeds 90 degrees. An inmate was found dead because of the heat in his cell, while he was detained at Anna K. Cross Center (C-95).

7/16/15
Nkechi Igbo


Kareem Hamilton

NKECHI IGBO
NOTARY PUBLIC-STATE OF NEW YORK
No. 011G6163948
Qualified in Queens County
My Commission Expires April 09, 2019

On
these
claims

VI. Previous lawsuits:

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ___ No ☒

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ___ No ___

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☒ No ___

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Karen Hamilton
Capt. Monroe, Capt. Saint-Fleur # 106Defendants Deputy Warden, Warden of Security, Joseph Ponte, Comiller # 8331, Co. Davidson # 12593

2. Court (if federal court, name the district; if state court, name the county) United State
District Courts of New York

3. Docket or Index number 15-CV-4031 (KBF)

4. Name of Judge assigned to your case Katherine B. Forrest

5. Approximate date of filing lawsuit May 2, 2015

6. Is the case still pending? Yes ☒ No ___

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) N/A

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 25 day of November, 2015.

Signature of Plaintiff

Narciso Hamilton

Inmate Number

441150 1732

Institution Address

1600 Hazen Street

East Elmhurst New York 11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 25 day of November, 2015, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Narciso Hamilton

Western Hamilton 441501732
1600 Hacen Street
East Elmhurst NY 11370



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500 Pearl street

United States District Court

Southern District of New York

Pro-se
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